Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. JUAW EDUCATION FUND 8000 EAST JEFFERSON AVENUE ADDRESS (number and street) (Check if address is changed) DETROIT 48214 MI CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS uawvcap@uaw.net (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 20 2021 C00528448 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. MOCK, MARGARET, , , Type or Print Name of Treasurer MOCK, MARGARET, , , [Electronically Filed] 01 19 2023 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

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. TYPE OF COMMITTEE:						
Candidate Committee:	andidate Committee:					
(a) This committee is a pri	incipal campaign committee. (Complete the candidate	te information below.)				
(b) This committee is an a information below.)	authorized committee, and is NOT a principal campa	nign committee. (Complete the candidate				
Name of Candidate						
Candidate Party Affiliation	Office Sought: House Senate	e President District				
(c) This committee support	ts/opposes only one candidate, and is NOT an auth	norized committee.				
Name of Candidate						
Party Committee:	urty Committee:					
(d) This committee is a	(National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party				
Political Action Committee	(PAC):					
(e) This committee is a se	parate segregated fund. (Identify connected organization	ation on line 6.) Its connected organization is a:				
Corporation	Corporation w/o Capital Sto	ock Labor Organization				
Membership Orga	nization Trade Association	Cooperative				
In addition, the	nis committee is a Lobbyist/Registrant PAC.	_				
(f) This committee support	ts/opposes more than one Federal candidate, and is	s NOT a separate segregated fund or party				
In addition, this committee is a Lobbyist/Registrant PAC.						
In addition, the	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)					
(g) X This committee is an ir	ndependent expenditure-only political committee (Sup	per PAC).				
🗴 In addition, th	In addition, this committee is a Lobbyist/Registrant PAC.					
(h) This committee is a po	litical committee with both contribution and non-cont	tribution accounts (Hybrid PAC).				
In addition, the	In addition, this committee is a Lobbyist/Registrant PAC.					
Joint Fundraising Represe	ntative:					
(1)	s contributions, pays fundraising expenses and disbuns, at least one of which is an authorized committee	·				
(1)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.					
Committees Participating in	Joint Fundraiser					
1.		C				
		C				

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٧	Vrite or Type Committee Name				
	UAW EDUCA	TION FUND			
6.	-	Organization, Affiliated Committee, Joint Fundraising Repres OMOBILE AEROSPACE & AGRICULTURAL IMPLEMENT WO			
	Mailing Address	8000 EAST JEFFERSON AVENUE			
		DETROIT	MI 48214		
		CITY ▲ S	STATE ▲ ZIP CODE ▲		
	Relationship: X Connected	Organization Affiliated Organization Joint Fundraising F	Representative Leadership PAC Sponso		
			_		
7.	Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.				
	MOCK. M	ARGARET,,,			
	Full Name				
	Mailing Address	8000 EAST JEFFERSON AVENUE			
		DETROIT	MI 48214		
		CITY ▲ S	STATE ▲ ZIP CODE ▲		
	Title or Position ▼				
	SECRETARY TREASURER	Telephone numb	per 313 - 926 - 5035		
8.	Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).				
	Full Name MOCK, MA	ARGARET, , ,			
	of Treasurer				
	Mailing Address	8000 EAST JEFFERSON AVENUE			
		DETROIT	MI 48214		
		CITY ▲ S	STATE ▲ ZIP CODE ▲		
	Title or Position ▼				
	SECRETARY TREASURER	Telephone numb	per 313 - 926 - 5035		

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Full Name of Designated			- ngu			
Agent						
Mailing Address						
Title or Position	CITY ▲	STATE ▲	ZIP CODE ▲			
		one number				
Banks or Other safety deposit b	Depositories: List all banks or other depositories in which the coxes or maintains funds.	ommittee deposits funds, h	olds accounts, rents			
Name of Bank,	Depository, etc.					
	JP MORGAN CHASE					
Mailing Address	611 WOODWARD					
	DETROIT	MI 4822	6			
	CITY ▲	STATE ▲	ZIP CODE ▲			
Name of Bank, Depository, etc.						
Mailing Address						
	CITY ▲	STATE ▲	ZIP CODE ▲			